

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		65455	1/15/50
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
= ..... Allowed      I ..... Interference  
- (Through numeral)... Canceled      A ..... Appeal  
÷ ..... Restricted      O ..... Objected

Claim		Date
Final	Original	
1	2/9/24	
2	0/1/25	
3	N	
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6	N	
7	N	
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Claim		Date
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If more than 150 claims or 10 actions  
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